# Information Page Mail-in Application for Copy of Birth Certificate

### **General Instructions**

**Do not** use this application to submit your request by fax.

Use this application only if you are the person named on the birth certificate or that persons parents.

Use this application only if the birth occurred in New York State *outside* of New York City. **Do not** use this application if the birth occurred in any of the five (5) boroughs of New York City.

**Do not** use this application for *genealogy requests*.

Print a copy of this application, complete and sign.

Mail application along with check or money order and a copy of the required documentation (see below).

For regular handling send by first class mail, registered mail, certified mail or U.S. Priority Mail to:

For priority handling: 518-234-1719

Town of Cobleskill 378 Mineral Springs Road PO Box 327 Cobleskill, NY 12043

## Identification Requirements: Application must be submitted with copies of either A or B:

**Note:** Copy of Passport required if request is made from a foreign country that requires a U.S. Passport for travel.

A. One (1) of the following forms of valid photo-ID:

Driver license

Non-driver license

**Passport** 

Other government issued photo-ID

B. Two (2) of the following showing the applicants name and address:

Utility bill or telephone bill

Letter from a government agency dated within the last six (6) months

Fees: If no record is on file, a No Record Certification is issued and the fee is not refunded.

**For regular handling:** The fee is \$10.00 per copy. Total for one (1) copy is \$10.00. Total for two (2) copies is \$20.00, etc.

## For priority handling:

Completed requests will be returned by first class mail unless a **pre-paid** return mailer for overnight delivery is provided with the request.

Send check or money order payable to the Town Clerk. **Do not send cash.** 

**Note:** Payment submitted from foreign countries must be made by a check drawn on a United States bank or by international money order. **Do not send cash.** 

### **Completing the Form:**

You can print out a blank copy of the form and then type or print the required information.

Be sure to sign the form before mailing and include a check or money order made payable to the Town Clerk along with copies of the required identification.

Required ID must be included with application. Make check or money order payable to Town Clerk				
For regular handling: Enclose \$10 per copy or No Record Certification.	For priority handling: 518-234-1719			
Send to: Town of Cobleskill 378 Mineral Springs Road PO Box 327 Cobleskill, NY 12043	United States pre-paid return mailer for overnight delivery must be provided with the request			
Name: (as listed on birth certificate)			Date of Birth:	
First Middle		Last	(mm / dd / yyyy)	
Town, city or village where birth occurred: Name of hospital where birth occurred: (If known)				
Maiden Name of Mother: (as listed on birth certificate)		Birth Certificate No.: (If known)		
			Local Registration No.: (If known)	
Father: (as listed on birth certificate)				
		Number of Copies Requested:		
First Middle	First Middle Last		Standard Size:	
Purpose for which Record is Required:   Passport   Employment   Drivers license   Veterans benefits   Court proceeding   Court				
What is your relationship to person whose record is required? (If self, state "SELF".)				
This office requires written authorization of the person/parents whose record is requested.				
Signature of Applicant:  Date Signed:  Month Day Year	Regular Handling  \$10.00			
			Copies = \$	
Address of Applicant:	Please print or type the name and address where record should be sent: (If delivery is to a P.O. Box or third party, you must submit with this application a notarized statement signed by the applicant and a copy of the applicants drivers license.)			
(Applicants Name)				
(Street)	(Name)			
(City) (State) (Zi	(Street)			
Telephone No.: ( )	(City)		(State) (Zip	